

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR



FLORIDA DEPARTMENT OF STATE
 and B. M. ...
 Secretary of State
 DIVISION OF CORPORATION

98 AR

FILED

98 DEC -1 AM 10:44
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

DOCUMENT # **P94000090777**

1. Corporation Name

Z-92, INC.

Principal Place of Business Mailing Address
 3675 DERBYSHIRE RD 3675 DERBYSHIRE RD
~~212~~ ~~212~~
 CASSELBERRY FL 32707 CASSELBERRY FL 32707
 US US
 If above addresses are incorrect in any way, line through incorrect information and enter correction below.



2. New Principal Office Address, if Applicable		3. New Mailing Office Address, if Applicable		4. Date Incorporated or Qualified To Do Business in Florida	
Suite, Apt. #, etc. SUITE 213		Suite, Apt. #, etc. SUITE 213		12/15/1994	
City & State		City & State		5. FEI Number	
Zip		Zip		59-3298042	
Country		Country		Applied For	
				Not Applicable	
6. CERTIFICATE OF STATUS DESIRED <input type="checkbox"/>				\$3.75 Additional Fee required for a Certificate of Status	

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Title(s)	Name of Officers and/or Directors	Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	City / State / Zip
D / P	MOADY, SAID	3670 DERBYSHIRE RD- 3675 DERBYSHIRE RD #213	CASSELBERRY FL
D	BOULE, ARTHURA E JR.	618 TUSCARORA TRAIL	MAITLAND FL 32751
D	GIBSON, JANE S	1414 KUHL AVENUE	ORLANDO FL 32806
D	SHUFFIELD, KAREN	2307 LAKESIDE DR	WINTER SPRINGS FL- ORLANDO FL 32803
D/V	CHITTY, NATHAN	1344 SPRING LAKE DR	ORLANDO, FL 32804

8. Name and Address of Current Registered Agent	9. Name and Address of New Registered Agent
SHUFFIELD, W. CHARLES 315 EAST ROBINSON STREET SUITE 600 ORLANDO FL 32801	Name Street Address (P.O. Box Number is Not Acceptable) Suite, Apt. #, Etc. 300002700779-9 City ****150. State Zip Code 50.00 FL

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S.
 Signature of Registered Agent: *W. Charles Shuffield* **SIGNATURE REQUIRED** Date: **11/23/98**
 REGISTERED AGENT MUST SIGN

11. This corporation owes or has paid the current year Intangible Personal Property tax due June 30. Yes No (See other side for information on intangible tax.)

12. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(j), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE: *W. Charles Shuffield* **SIGNATURE REQUIRED** (407) 260-6471
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E040 (0/88)

AFFIDAVIT

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STATE OF FLORIDA)
COUNTY OF ORANGE)

BEFORE ME, the undersigned authority, personally appeared SAID MOADY (the "Affiant"), who, being first duly sworn upon oath, deposes and state the following:

1. That Affiant is the duly-elected President of Z-92, INC., a Florida corporation assigned Document Number P94000090777 (the "Company"), and has personal knowledge of the business and operations of the Company.
2. The Company was administratively dissolved on October 16, 1998, by the Florida Department of State for failure to file the 1998 corporation annual report.
3. The Company did not receive either the first or second notices to file the 1998 corporation annual report.
4. This Affidavit is being made to induce the Florida Department of State to file the Application for Reinstatement and accept a filing fee of \$150.

FURTHER AFFIANT SAYETH NAUGHT.

SAID MOADY

STATE OF FLORIDA)
COUNTY OF ORANGE)

The foregoing instrument was acknowledged before me this 18th day of November, 1998, by SAID MOADY.

Personally Known

OR

Produced Identification; Type of Identification Produced: N/A



Diane M. Kapusinski
Signature of Notary Public

Diane M. Kapusinski
Name of Notary Public